more broad based and comprehensive to include other forms of trafficking in persons.

Infant mortality rate

1667. SHRI SANJAY RAUT: Will the Minister of WOMEN AND CHILD DEVELOPMENT be pleased to state:

(a) whether the infant mortality rate in the country is still high;

(b) if so, the details in this regard during the last three years and the position of India amongst the countries of the world, in this respect;

(c) the reasons for continuing high mortality rate amongst the under five infants;

(d) the details of measures taken or proposed to be taken for reducing the infant mortality rate in the country;

(e) whether Government propose to secure any donation from the big business houses/organizations to combat this menace; and

(f) if so, the details thereof and if not, the reasons therefor?

THE MINISTER OF STATE OF THE MINISTRY OF WOMEN AND CHILD DEVELOPMENT (SHRIMATI RENUKA CHOWDHURY): (a) and (b) The Infant Mortality Rate (IMR) as per the Sample Registration System for 2005 is 58 per thousand live births. The State-wise details in this regard during the last three years are give in the Statement-I (*See* below).

The IMR in India and other countries of the world as per "The State of the World's Children 2007", published by UNICEF, is given in the Statement-II (*See* below).

(c) The major causes of mortality amongst infants in India are acute respiratory infections, sepsis, diarrhoea and measles. Anaemia and malnutrition levels among pregnant women, intrauterine growth retardation, low birth weight of the new borns, poor breastfeeding practices are some of the contributory factors.

(d) The Government is implementing a number of schemes in different sectors which directly or indirectly contribute to reducing infant mortality rate in the country. These are–

- Reproductive and Child Health Programme under the National Rural Health Mission launched in April, 2005 which includes
  - Maternal Health by promoting institutional deliveries, improved coverage and quality of ANC, skilled care to pregnant women, post-partum care at community level
  - Immunization
  - Integrated Management of Neonatal and Childhood Illnesses (IMNCI)
  - Emphasis on appropriate Infant and Young Child Feeding

- Micronutrient Supplementation with vitamin A, iron and folic acid, zinc.

- National Iodine Deficiency Disorders Control Programme (Ministry of Health and Family Welfare)
- Integrated Child Development Services (ICDS) Scheme (Ministry of Women and Child Development)
- Nutrition Programme for Adolescent Girls in 51 districts (Ministry of Women and Child Development)
- Nutrition Education and Training Programmes, Dissemination of National Guidelines on Infant and Young Child Feeding (Food and Nutrition Board, Ministry of Women and Child Development)
- Accelerated Rural Water Supply Programme/Swajaldhara and Total Sanitation Campaign/National Rural Employment Guarantee Programme (Ministry of Rural Development).
- Targeted Public Distribution System (Department of Food and Public Distribution).

(e) and (f) No donation has been taken from any business house/organization by the Ministry of Health and Family Welfare, which is implementing programmes under IMNCI and NRHM to combat this menace.

Statement-I

State-wise details of Infant Mortality Rate (IMR) during the last three years (2003-05)

Sl. No.	States	2003	2004	2005
1	2	2	3	4
	ALL INDIA	**60**	**58**	**58**
1.	Andhra Pradesh	59	59	57
2.	Assam	67	66	68
3.	Bihar	60	61	61
4.	Chhattisgarh	70	60	63
5.	Gujarat	57	53	54
6.	Haryana	59	61	60
7.	Jharkhand	51	49	50
8.	Karnataka	52	49	50
9.	Kerala	11	12	14
10.	Madhya Pradesh	82	79	76
11.	Maharashtra	42	36	36
12.	Orissa	83	77	75

1	2	2	3	4
13.	Punjab	49	45	44
14.	Rajasthan	75	67	68
15.	Tamil Nadu	43	41	37
16.	Uttar Pradesh	76	72	73
17.	West Bengal	46	40	38
18.	Himachal Pradesh	49	51	49
19.	Jammu and Kashmir	44	49	50
20.	Arunachal Pradesh	34	38	37
21.	Delhi	28	32	35
22.	Goa	16	17	16
23.	Manipur	16	14	13
24.	Meghalaya	57	54	49
25.	Mizoram	16	19	30
26.	Nagaland	NA	17	18
27.	Sikkim	33	32	30
28.	Tripura	32	32	31
29.	Uttaranchal	41	42	42
30.	A and N Islands	18	19	27
31.	Chandigarh	19	21	19
32.	D and N Haveli	54	48	42
33.	Daman and Diu	39	37	28
34.	Lakshadweep	26	30	22
35.	Pondicherry	24	24	28

Source: Sample Registration System, Registrar General, India

Statement-II

Infrant Mortality Rate (IMR) amongst selected countries of the world according to UNICEF

Sl. No.	Country	IMR (2005)
1	2	3
1.	Afghanistan	165
2.	Bangladesh	54
3.	Bhutan	65
4.	Central African Republic	115
5.	China	23

1	2	3
6.	Germany	4
7.	Mali	120
8.	Nepal	56
9.	Nigeria	100
10.	Pakistan	79
11.	Sri Lanka	12
12.	Togo	78
13.	United Kingdom	5
14.	United States	6
15.	Zimbabwe	81
16.	**India**	**56**

Source: State of the World's Children, 2007, published by UNICEF

Schemes for welfare of women and children

1668. SHRI PRAVEEN RASHTRAPAL: Will the Minister of WOMEN AND CHILD DEVELOPMENT be pleased to state:

(a) the details of various schemes for the welfare of women and children where financial and other assistance are provided by Government; and

(b) the details of such financial assistance given to Gujarat, Maharashtra, Madhya Pradesh and Rajasthan during 2004-05 to 2006-07?

THE MINISTER OF STATE OF THE MINISTRY OF WOMEN AND CHILD DEVELOPMENT (SHRIMATI RENUKA CHOWDHURY): (a) and (b) The details of schemes being implemented by the Ministry of Women and Child Development for the welfare of women and children and financial assistance given to Gujarat, Maharashtra, Madhya Pradesh and Rajasthan during 2004-05 and 2005-06 are given in this Ministry's website *www.wcd.nic.in* and Annual Reports, which are available in the Library of the Rajya Sabha. The details of financial assistance pertaining to the year 2006-07 to these States are given in the Statement.

Statement

Funds released to Gujarat, Maharashtra, Madhya Pradesh and Rajasthan during 2006-07 *for the welfare of women and children*

(Rs. in lakhs)

Sl. No.	Name of the Scheme	Gujarat	Maharashtra	Madhya Pradesh	Rajasthan
1	2	3	4	5	6
1	Rajiv Gandhi National Creche Scheme	354.64	548.52	632.73	281.93